

Missouri Department of Elementary and Secondary Education
District Technology Plan Review/Approval of ONE-YEAR EXTENSION (addressing July 2006 – June 2007)

Following is the request form for approval of a one-year extension to the district's currently approved technology plan. To request a review of the extension, complete the top portion of this form and email it as an attachment along with the extension plan for 2006-07. The email should include two attachments: the approval cover form and the extension plan. Attachments should be saved in rich text format (RFT). Attachments should be named using the district's six-digit county district code (no hyphen or space), the attachment type (cover or tech plan) and year (06) – examples: 001001cover06 and 001001techplan06. The tech plan document should include footer with this same information (e.g., 001001techplan06) and page numbers. Send the email to Instructional Technology at webreplyimprtechplans@dese.mo.gov. For additional information and planning assistance, contact Instructional Technology staff at 573-751-8247, instrtech@dese.mo.gov, or visit the technology planning website at <http://dese.mo.gov/divimprove/instrtech/techplan/gettingstarted.htm>.

REQUEST FOR TECHNOLOGY PLAN EXTENSION REVIEW – To be completed by district contact Submission Date: _____

District Name: _____	County/District Code: _____ - _____	Date Plan Approved by Board: _____
District Address: _____ Contact Person: _____		
Telephone: _____	Fax: _____	Email Address: _____
Date Previous Tech Plan Approved by Board: _____ Date Last CSIP Approved by Board: _____		

STATE APPROVAL – To be completed by the Department

Approved for E-rate and Title II.D: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date approved: _____
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Missouri Department of Elementary and Secondary Education Technology Plan Guide for ONE-YEAR EXTENSION

INTRODUCTION: Orient the reviewer by providing a brief description of who was involved and the processes and steps that were taken in developing the goals and objectives and TFA action plans for the extension period (covering July 1, 2006 through June 30, 2007).

ACTION PLANS: Iterate the action plans of the district's current, state-approved technology plan and indicate the current status of those action plan items – and either (1) extend the current action plan items to address the 2006-07 school year (noting any revisions), and/or (2) add new action plan items as needed (because of changes in the district, most of the current plan's items have been met, or the extension covers technologies the district will propose in an E-Rate application). An example of the suggested format is provided below.

<p>Needs Revision (1-2 points) Action Plan is missing or inadequate or not based on current data to determine the effect of technology on student learning.</p> <p>See note*.</p>	<p>Adequate/Required (3-4 points – all Adequate boxes are required for 4 points) Action Plan details:</p> <ul style="list-style-type: none"> <input type="checkbox"/> goal and objective(s) <input type="checkbox"/> TFA <input type="checkbox"/> action step/activity <input type="checkbox"/> timeline/completion date <p>Commendable (5 points – all Adequate boxes plus majority of Commendable boxes are necessary for 5 points) Action Plan details:</p> <ul style="list-style-type: none"> <input type="checkbox"/> estimated cost/budget <input type="checkbox"/> funding source(s) <input type="checkbox"/> alignment with CSIP and MSIP goals/standards and state education technology plan goals and objectives <input type="checkbox"/> alignment with Show-Me Standards and Grade-Level Expectations (GLE) <input type="checkbox"/> person responsible <input type="checkbox"/> review dates <input type="checkbox"/> benchmarks <input type="checkbox"/> correction strategies 	<p>Score</p>
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SAMPLE ACTION PLAN FORMAT

Tech Plan Goal 1:								
Objective 1:								
TFA(s):								
MSIP Standard ⁽¹⁾	CSIP Objective/Strategy	Action Step/ Activity (Expected progress and how measured)	Person(s) Responsible	Timeline/ Begin - End Dates	Cost Estimate	Funding Source(s)	Benchmark/ Review Date(s)	Progress (Met or Not Met)

⁽¹⁾ Indicate Show-Me Standard and Grade-Level Expectations, if appropriate